

CLAIMS ONLY							Application Number <div style="font-size: 1.5em; font-weight: bold;">10/019323</div>	Filing Date.				
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep												
Total Depend												
Total Claims												

Filing Date.

Applicant(s)

\* May be used for additional claims or amendments